MAY 1 6 2005

Name (Print/Type) D. Brent Kenady

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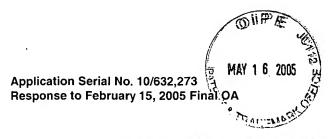
| Under the Panery  | vork Reduction Act o          | f 1995 no pei                   | rsons are required to                             | U.S. Pate<br>respond to a collect | ent and Trac                  | demark Offic<br>mation unles | e; U.S. DEF<br>s it displays | PARTMENT OF COMMERCE a valid OMB control number |  |
|---|-------------------------------|---------------------------------|---|-----------------------------------|-------------------------------|------------------------------|------------------------------|---|--|
|   | Complete if Known             |                                 |   |                                   |                               |                              |                              |   |  |
| Effective on 12/08/2004.  Fees pursuant to the Orisolidated Appropriations Act, 2005 (H.R. 4818).   |                               |                                 |   | Application Number 10/632,2       |                               |                              | 73                           |   |  |
| FEE TRANSMITTAL   |                               |                                 |   | Filing Date July 31, 2003         |                               |                              |                              |   |  |
| For FY 2005   |                               |                                 |   | First Named I                     | First Named Inventor Warren M |                              | M. Farnworth et al.          |   |  |
| Applicant cl  | Examiner Nar                  | Examiner Name Russell M. Kobert |   |                                   |                               |                              |                              |   |  |
|   | Art Unit                      |                                 | 2829  |                                   |                               |                              |                              |   |  |
| TOTAL AMOUN   | Attorney Dock                 | ket No.                         | . MI22-2379                                       |                                   |                               |                              |                              |   |  |
| METHOD OF PAYMENT (check all that apply)  |                               |                                 |   |                                   |                               |                              |                              |   |  |
| Check Credit Card Money Order None Other (please identify):   |                               |                                 |   |                                   |                               |                              |                              |   |  |
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| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  |                               |                                 |   |                                   |                               |                              |                              |   |  |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee  |                               |                                 |   |                                   |                               |                              |                              |   |  |
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| under 37 CFR 1.16 and 1.17  |                               |                                 |   |                                   |                               |                              |                              |   |  |
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| FEE CALCUL  | ATION                         |                                 |   |                                   |                               |                              |                              |   |  |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES   |                               |                                 |   |                                   |                               |                              |                              |   |  |
|   | FILI                          | NG FEES<br>Small E              |   | RCH FEES Small Entity             | EXAN                          | INATION <u>,</u><br>Small    |                              |   |  |
| Application   |                               | (\$) <u>Fee</u>                 |   | \$) Fee (\$)                      | <u>Fee</u>                    | (\$) Fee                     |                              | Fees Paid (\$)                                  |  |
| Utility   | 300                           | 150                             | 500   | 250                               | 200                           | 100                          | 0                            | 0.00  |  |
| Design  | 200                           | 100                             | 100   | 50                                | 130                           | ) 6:                         | 5                            | 0.00  |  |
| Plant   | 200                           | 100                             | 300   | 150                               | 160                           | ) 80                         | 0                            | 0.00  |  |
| Reissue   | 300                           | 150                             | 500   | 250                               | 600                           | 30                           | 0                            | 0   |  |
| Provisional   | 200                           | 100                             | 0   | 0                                 | C                             | ) (                          | 0                            | 0.00  |  |
| 2. EXCESS C<br>Fee Description  |                               |                                 |   |                                   |                               | F                            | ee (\$)                      | Small Entity<br>Fee (\$)                        |  |
|   | <u>on</u><br>over 20 (includi | ng Reissue                      | es)   |                                   |                               | _                            | 50                           | 25  |  |
| Each independent claim over 3 (including Reissues)  200 100   |                               |                                 |   |                                   |                               |                              |                              |   |  |
| Multiple dependent claims   |                               |                                 |   |                                   |                               | 360 180                      |                              |   |  |
| Total Claims  | <u>Extra</u><br>20 or HP = 3  | <u>Claims</u><br>x              | <u>Fee (\$)                                  </u> | <u>ee Paid (\$)</u><br>150        |                               |                              | <u>ultiple De</u><br>ee (\$) | pendent Claims<br>Fee Paid (\$)                 |  |
|   | mber of total claims p        |                                 |   | 150                               |                               | _                            | 0.00                         | 0.00  |  |
| Indep. Claims   |                               | Claims                          |   | e Paid (\$)                       |                               |                              | <u> </u>                     | 0.00  |  |
| 3 or HP =6x200 =1200<br>HP = highest number of independent claims paid for, if greater than 3.  |                               |                                 |   |                                   |                               |                              |                              |   |  |
| 3. APPLICATION SIZE FEE   |                               |                                 |   |                                   |                               |                              |                              |   |  |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 |                               |                                 |   |                                   |                               |                              |                              |   |  |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).   |                               |                                 |   |                                   |                               |                              |                              |   |  |
| <u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>  |                               |                                 |   |                                   |                               |                              |                              |   |  |
| - 100 = / 50 = (round up to a whole number) x =<br>4. OTHER FEE(S) Fees Paid (\$)   |                               |                                 |   |                                   |                               |                              |                              |   |  |
| Non-English Specification, \$130 fee (no small entity discount)   |                               |                                 |   |                                   |                               |                              |                              |   |  |
| Other (e.g., late filing surcharge): 0.00   |                               |                                 |   |                                   |                               |                              |                              |   |  |
| SUBMITTED BY  |                               |                                 |   |                                   |                               |                              |                              |   |  |
| Signature Registration No. (Attorney/Agent) 40,045 Telephone (5   |                               |                                 |   |                                   |                               | e (509) 624-4276             |                              |   |  |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date





## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| Application Serial No | 10/632,273                 |
|-----------------------|----------------------------|
| Filing Date           |                            |
| Inventor              | Warren M. Farnworth et al. |
| Assignee              | Micron Technology, Inc.    |
| Group Art Unit        | 2829                       |
| Examiner              | R. Kobert                  |
| Attorney's Docket No  | Ml22-2379                  |
| Customer No           | 021567                     |

Title: Method and Apparatus for Testing Semiconductor Circuitry for Operability and Method of Forming Apparatus for Testing Semiconductor Circuitry for Operability

## RESPONSE TO FEBRUARY 15, 2005 FINAL OFFICE ACTION PURSUANT TO 37 C.F.R. § 1.116

To:

Mail Stop AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

From:

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Wells St. John P.S.

601 W. First Avenue, Suite 1300 Spokane, WA 99201-3828

Responsive to the Final Office Action dated February 15, 2005, Applicant amends and remarks as follows:

05/19/2005 MAHMED1 00000042 10632273

01 FC:1201 02 FC:1202 1200.00 OP 150.00 OP

<u>AMENDMENTS</u>

<u>Underlines</u> indicate insertions and strikeouts indicate deletions.

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